	2012 AUG 13 AM 8: 10
Committee Name:	FEC MAIL CENTER
NEBRASKA HORSE ASSOCIATION	
If registered, FEC ID:	
Today's Date:	
08/08/2012	
Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463	
Re: Form 1, Statement of Organization—Unlim	nited Contributions
To Whom It May Concern:	
This committee intends to make independent ex	spenditures, and consistent with
the U.S. Court of Appeals for the District of Co	lumbia Circuit decision in
SpeechNow v. FEC, it therefore intends to raise	funds in unlimited amounts. This
committee will not use those funds to make con	tributions, whether direct, in-kind,
or via coordinated communications, to federal of	andidates or committees.
Respectfully submitted,	

, Treasurer

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Julie Caramante

Treasurer's Name:

## 12030873230

FEC FORM 1

## STATEMENT OF ORGANIZATION

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2012 AUG 18: 101 8: 10

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NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
NEBRASKA HO	RSE ASSOCIA	TION			
	1111111			لتتبييا	
ADDRESS (number and street)		1111111			
(Check if address is changed)					
is changed)					
	c	ITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRES					
(Check if address	nenorseassoc	iation@gmail.co	$pm_{++++}$		
is changed)					
COMMITTEE'S WEB PAGE ADD	PRESS (URL)				
	nebraskahorse	eassociation.tur	nblr.com		
(Check if address is changed)			<del>1_1_1_1_1_1_1</del>		
2. DATE					
3. FEC IDENTIFICATION NU	MBER C				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasurer	Type or Print Name of Treasurer  Julie Caramante				
Signature of Treasurer	Julie Carar	mante	Date 08 <sup>M</sup>	08° ′ 2012 ``	
NOTE: Submission of false, erroned	ous, or incomplete information of		•	penalties of 2 U.S.C. §437g.	
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

	FEC Fo	rm 1 (Revised 02/2009) Page 2
i.	TYPE OF C	OMMITTEE
	Candidate	e Committee:
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
	(p)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	Name of Candidate	
	Candidate Party Affiliation	Office C C State
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name of Candidate	
	Party Con	nmittee:
	(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
	Political A	ction Committee (PAC):
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
		Corporation ·- Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
	Joint Fund	Iraising Representative:
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	Com	
	1.	FEC ID number 10
	2.	FEC ID number C
	3.	FEC ID number: C
	4.	

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N.

FEC Form 1 (Rev	sed 02/2009)	Page 3
Write or Type Committee	Name	
NEBRASKA A	ASSOCIATION	
6. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundralsing Represen	ntative, or Leadership PAC Sponsor
Monarri		
None		
Mailing Address		
	CITY	TATE ZIP CODE
Relationship: Conr	ected Organization Affiliated Committee Joint Fundraising Rep	resentative Leadership PAC Spons
Custodian of Records books and records.	ldentify by name, address (phone number optional) and position o	of the person in possession of committee
Pa	μ <b>la Βacon</b>	
	1504 S. Houston Street	<del></del>
Mailing Address		<del>                                      </del>
	- Varifman	·751/12
	Kaufman T	X
Title or Position	CITY STA	ATE ZIP CODE
Custodian of I	Records Telephone number	[972, ]-[824, ]-[1073 ,
	e and address (phone number optional) of the treasurer of the corresp., assistant treasurer).	nmittee; and the name and address of
Full Name Jul	ie Caramante	
Mailing Address	1504 S. Houston Street	<del></del>
. <del>-</del>	1.,,,,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	ıKaufman ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı	[X <sub>1</sub>  75142    -
	CITY STA	
Title or Position		281,  _ 766,  _ 4040
110000171	Telephone number	

FEC Form 1 (Re	evised 02/2009)		Page 4
		-	
Full Name of Designated Agent	ıla Bacon		
Mailing Address	1504 S. Houston Street		
		11111	
	<b>Καυfman</b> cπγ	STATE	75142   -     ZIP CODE
Title or Position Assistant Treasu	<b>urer</b> Tel	ephone number [972	2,
Banks or Other Depos safety deposit boxes or	sitories: List all banks or other depositories in which maintains funds.	the committee deposits f	funds, holds accounts, rents
Name of Bank, Deposite	ory, etc.		
JPN	/lorgan Chase Bank , , , , , , , , ,	1 1 1 1 1 1 1	
Mailing Address	811 Preston Road		
	[Dallas	TX.	[ <b>7</b> 5525 <sub>     </sub> _   _
	CITY	STATE	ZIP CODE
Name of Bank, Deposit	ory, etc.		
_ن_ا			
Mailing Address			
	CITY	STATE	ZIP CODE

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED